

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF OHIO
FOR THE WESTERN DIVISION

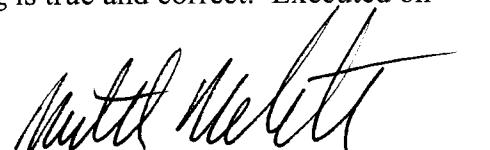
DARLINGTON AMADASU, : Case No. No. C-1-01-210
Plaintiff, : Judge Dlott
v. : Magistrate Judge Black
JAMES R. DONOVAN, M.D., et al., :
Defendants.

DECLARATION OF MITCHELL D. MCCRATE

Mitchell D. McCrate declares as follows:

1. I am Associate General Counsel for the University of Cincinnati ("UC") and worked for UC at all times relevant to Darlington Amadasu's claims in this action. I am competent to testify as to the points in this Declaration and do so from my own personal knowledge.
2. According to UC's records Muriel Pohl has not been employed by UC since 1997.
3. Attached as Exhibit A to my declaration is a copy of the EEOC charge that UC received around April or May 2001 naming Darlington Amadasu as the Charging Party.

I declare under penalty of perjury that the foregoing is true and correct. Executed on
March 30, 2005.



Mitchell D. McCrate

CHARGE OF DISCRIMINATION

Case 1:01-cv-00210-SJD-TSB Document 97-4

Filed 03/31/2005

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This form is affected by the Privacy Act of 1974; See Privacy Act Statement before completing this form.

AGENCY
 FEPA
 EEOCCHARGE NUMBER
221A10405

State or local Agency, if any

and EEOC

NAME (Indicate Mr., Ms., Mrs.) Mr. Darlington Amadasu		HOME TELEPHONE (Include Area Code) (513) 662-7547	
STREET ADDRESS 2680 Wendee Drive, Unit 2303, Cincinnati, OH 45238		CITY, STATE AND ZIP CODE 01/01/1949	
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)			
NAME University Of Cincinnati	NUMBER OF EMPLOYEES, MEMBERS Cat D (501 +)	TELEPHONE (Include Area Code) (513) 556-4000	
STREET ADDRESS 300-C Administration Bldg. Cincinnati, OH 45221	CITY, STATE AND ZIP CODE 061	COUNTY	
NAME	TELEPHONE NUMBER (Include Area Code)		
STREET ADDRESS	CITY, STATE AND ZIP CODE	COUNTY	
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))			
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input checked="" type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input checked="" type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify)		DATE DISCRIMINATION TOOK PLACE EARLIEST LATEST 07/01/2000 03/19/2001 <input type="checkbox"/> CONTINUING ACTION	

THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s)):

- I. I am a native of Nigeria, 52 years of age, and I have a disability. Since July 1, 2000, I have been denied academic records and grades to show that I have successfully completed my residency in the Division of Occupational Medicine in retaliation for making an internal complaint of employment discrimination in 1999. I was the oldest resident in the program and I was the only person of color.
- II. James Donovan, M.D. (White, 50's, my personal advisor and program director) has not given me a reason for withholding my grades and other records.
- III. I believe I have been discriminated against because of my national origin, age, disability, and because of my opposition to employment practices made unlawful in violation of Title VII, the Age Discrimination in Employment Act, and the Americans with Disabilities Act.
- IV. This charge is not dual filed with the Ohio Civil Rights Commission.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY (When necessary for State and Local Requirements) <i>Howard Hawkey, Esq.</i>
I declare under penalty of perjury that the foregoing is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.
Date EEOC FORM 5 (Rev. 07/99)		SIGNATURE OF COMPLAINANT <i>John L.</i> SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (Month, day and year) <i>4-26-01</i>
Charging Party (Signature)		FILE COPY

EXHIBIT A

STATE OF

OHIO

CASE NAME Amadasu vs Universit

CITY/COUNTY OF

Cincinnati/Hamilton

CASE NUMBER 221A10405

AFFIDAVIT

I, Darlington Amadasu being first duly sworn upon my oath affirm and hereby say:
(Name)

I have been given assurances by an Agent of the U.S. Equal Employment Opportunity Commission that this Affidavit will be considered confidential by the United States Government and will not be disclosed as long as the case remains open unless it becomes necessary for the Government to produce the affidavit in a formal proceeding. Upon the closing of this case, the Affidavit may be subject to disclosure in accordance with Agency policy.

I am 52 years of age, my gender is Male (sex) and my racial identity is Black (race).

I reside at 2680 Wendee Drive, Unit 2303 (Number/Street),

City of Cincinnati, County of Hamilton,

State of OH, Zip Code 45238.

My telephone number is (including area code) (513) 662-7547.

My statement concerns University Of Cincinnati (Name of Union/Company/Agency) which is located at 300-C Administration Bldg (Number/Street),
in Cincinnati (City) OH (State) 45221 (Zip).

My job classification is (If applicable) Medical Resident (job title).

My immediate supervisor is (If applicable) James Donovan, M. D., Program Director (Name) (job title).

I am a native of Nigeria with U. S. citizenship since 1995, 52 years of age, and I have a disability (depression). I was an occupational medicine resident of this university from July 1, 1999 through July 30, 2000. I was an employee of the university and my salary was approximately \$30,000/year. My treatment for depression began in 1994 when I was living in New York City. I also suffered from panic attacks, chronic fatigue, and post traumatic stress disorder during the last seven years. I attempted suicide in April, 2000 and I was treated in Mercy Franciscan Hospital for seven days. My attending psychiatrist was Ravi Berry, M.D. I believe my employer has disciplined me by withholding my grades, academic transcript, and residency evaluation. I fully completed my required work for the residency. I have been denied assignments to work in any hospital in the world by denying me these documents and I believe my employer did these things because of my national origin, age, color, and disability. I was the only Nigerian or person of color in the program. I was the oldest resident in the program, but most of us are over 40 years of age. James Donovan, M.D. was the Program Director as well as my individual advisor. There were six residents in the program of which five were White. Each of the Whites was given his or her grades, evaluations, and correct and complete academic transcripts or ~~notations~~^{evaluations} at the end of his or her courses or rotation of clinic assignments. The White residents have



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(initials)

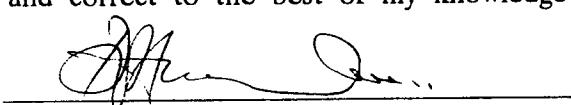
STATE OF OHIOCASE NAME Amadasu vs UniversitCITY/COUNTY OF Cincinnati/HamiltonCASE NUMBER 221A10405**AFFIDAVIT (cont.)**

gone on to professional medical careers since July, 2000.

Dr. Donovan never gave me an explanation for withholding my grade. Other faculty gave me incorrect grades and withheld evaluations which denied me credit for the work I did. The designation for audit courses was of no credit but the instructor gave me an "F" for a failing grade and I deserved a passing grade for all of my courses. All four of the teaching faculty for these courses are White. I made internal complaints concerning my national origin in 1999. Dr. Andrew Freeman (White, Assistant Program Director) told me that I had a heavy African accent and I felt that I was being discriminated against. I can provide documentation of my written complaint at a later date. I didn't receive a response from the university after I complained. I am not aware of any supportive witnesses for my case at this time.

In July, 2000, I was denied an assignment for a Family Practice program as a second year resident position paying \$40,000 per year. The Family Practice position is conducted by the university through an affiliation with Mercy Franciscan Hospital. I am aware that the position was given to a White applicant. I don't know the age of the person who received that position. I am filing the charge because I am seeking to get credit for my completed residency. I am being denied professional assignments because of the university's actions. I am expecting to file a federal lawsuit immediately after filing the charge with the EEOC. In September, 2000, I filed a related EEOC charge against the Mercy Franciscan Hospital.

I have read and had an opportunity to correct this Affidavit consisting of 2 handwritten typed X pages and swear that these facts are true and correct to the best of my knowledge and belief.



Subscribed and sworn to before me

this 26th day of April, 2001.

